DECLARATION, ENGLISH LANGUAGE DECLARATION,

As the below named inventor, I hereby declare that:

My residence, post office address, and citizenship are stated below next to my name and signature,

I believe I am the original, first, and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled,

Non-Phar	macological Method fo Ove	r Treating Depre erall Health and V		rders, and Improving
described in	1:			
(X) the specification file	ed herewith.		
() application serial no	D	, filed	
	and was amend	led on If App	olicable	
reviewed as	ereby state that I can and understand the contumended by any amended	ents of the above	e identified spec	sh language and have ification, including the
I a examination 1.56(a).	cknowledge the duty n of this application in	to disclose in accordance with	formation which Title 37, Code of	h is material to the of Federal Regulations,
any foreigr identified b	application(s) for pat	ent or inventor's cation for patent	certificate listed or inventor's ce	ed States Code, 119 of d below and have also rtificate having a filing
Prior Foreign Application(s)			Priority Claimed	
Country	Application No.	Filing Date	Yes No	
Country	Application No.	Filing Date	Yes No	

I hereby claim the benefit under Title 35, United States Code 120, of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of

Federal Regulations 1.56 (a) which occurred between the filing date of the prior application and the national or PCT international filing date of this application in accordance with Title 37, Code of Federal Regulations 1.63(d).

Application No. Filing Date Status

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Send correspondence to:

JACK V. SMITH P.O. BOX 156, Arden, NC 28704 Direct telephone calls to: JACK V. SMITH (828)650-0410/(828)-650-0409 (828)275-0343

Full name of sole or first inventor: Jack V2, Smith

Inventor's Signature:

Date:

Residence: P.O. Box 156, Arden NC 28704

Post Office Address: SAME Citizenship: U.S. Citizen

page 2 of 2

Declaration for Utility or Design Patent Application

As a below-named inventor, I hereby declare that my residence, post office address, and citizenship are as stated below next to my name and that I believe that I am the original, first, and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention, the specification of which is attached hereto and which has the following title:

"Non-Pharmacological Method for Treating Depression, Skin Disorders, and Improving Overall Health and"

I have reviewed and understand the contents of the above-identified specification, including the claims, as amended by any amendment specifically referred to in the oath or declaration. I acknowledge a duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations, Section 1.56(a).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Title 18, United States Code, Section 1001, and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Please send correspondence and make telephone call to the First Inventor below.

Signature:

Jack V. Ş⁄mith

Date:

Address:

Jack V. Smith

P.O. Box 156

Arden, NC 28704

Phone:

828-650-0410

Phone:

In the United States Patent and Trademark Office

	Mailed: At:
Assistant Commissioner for Patents Washington, District of Columbia 20231	11.
RE: Request Under MPEP § 707.07(j)	
Sir:	
The undersigned, a pro-se applicant, resper patentable subject matter disclosed in this applicants are not entirely suitable, the Examin applicant as a request under MPEP § 707.07	oplication, but feels that Applicant's present ner draft one or more allowable claims for
Very respectfully,	
Date: 9/13/0/	
Applicant: Jack V. Smith, signature	
Address: Jack V. Smith	

828-650-0410 / 828-650-0409

P.O. Box 156 Arden, NC 28704